



The Report of the
Visiting Committee
OF
THE MENTAL HOSPITAL
FOR THE
City and County of Bristol
FOR THE YEAR
1930

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The Report of the
Visiting Committee

OF

THE MENTAL HOSPITAL

FOR THE

City and County of Bristol,

TOGETHER WITH THE

REPORTS OF THE VISITING COMMISSIONERS
OF THE BOARD OF CONTROL,
THE MEDICAL SUPERINTENDENT AND
THE CHAPLAIN,

AND THE

Abstract of Account.

BRISTOL:

J. W. ARROWSMITH LTD., PRINTERS, QUAY STREET.

—
1931.

Visiting Committee and Officers

FOR THE YEAR 1931.

Committee :

THE RT. HON. THE LORD MAYOR (ALD. F. F. CLOTHIER).
W. H. BYRT, Esq., *Chairman*.
ALDERMAN W. H. ACKLAND, *Deputy-Chairman*.
F. BERRIMAN, Esq.
R. G. CUNNINGHAM, Esq.
A. V. DESPRES, Esq.
F. E. C. HABGOOD, Esq.
E. G. HARDING, Esq.
S. C. HUMPHRIES, Esq.
MISS L. MEADE-KING.
A. F. MOON, Esq.
MRS. L. M. PHEYSEY.
G. I. RIGHTON, Esq.
H. A. WHITE, Esq.
T. J. WISE, Esq.

Officers of the Hospital :

EDWARD BARTON WHITE, M.R.C.S., L.R.C.P. Lond., *Medical Superintendent*.
HERBERT SMITH, M.R.C.S., L.R.C.P., *Deputy Medical Superintendent*.
LEONARD BARBER, M.B., B.S., L.R.C.S., L.R.C.P. Edin., D.P.M., *Second Assistant Medical Officer*.
T. E. NORMAN SIMPSON, M.R.C.S. Eng., L.R.C.P. Lond., *Third Assistant Medical Officer*.
JOSIAH GREEN, *Clerk to the Committee*.
ARTHUR W. KING, *Clerk and Steward*.
MISS DOROTHY JONES, *Matron*.
CHARLES S. HUMBER, *Head Male Nurse*.
REV. D. O. DAVIES, *Chaplain, Church of England*.
REV. A. F. WEBB, *Chaplain, Nonconformist*.
THE VERY REV. CANON O'RIORDAN, *Chaplain, Roman Catholic*.
MISS D. BOWEN, J.P., *Welfare Visitor*.

Consulting Staff :

CAREY F. COOMBS, M.D., F.R.C.P. Lond., *Consulting Physician*.
D. G. C. TASKER, M.S. Lond., M.B., F.R.C.S. Eng., L.R.C.P. Lond.,
Consulting Surgeon.
GORDON R. SCARFF, M.B., Ch.B., F.R.C.S., *Consulting Surgeon
Nose, Ear and Throat*.
DAVID C. RAYNER, F.R.C.S., *Consulting Gynæcologist*.
CYRIL H. WALKER, M.B., F.R.C.S., *Consulting Ophthalmic Surgeon*.
A. L. TAYLOR, M.D., *Pathologist*.
J. CLIFFORD WING, L.D.S., R.C.S. Eng., *Visiting Dental Surgeon*.

To the Council of the City and County of Bristol.

The Seventieth Annual Report of the Visiting Committee

OF THE
MENTAL HOSPITAL FOR THE
CITY AND COUNTY OF BRISTOL.

YOUR Committee have pleasure in reporting that during the past year the condition of the patients has been satisfactory and the work of the Hospital efficiently maintained.

The number of patients on the books on 31st December last was 1,067, viz. 488 men and 579 women, as against 1,013, viz. 472 men and 541 women, on 31st December, 1929.

The Commissioners of the Board of Control paid visits to the Hospital on the 18th March, 1930, and 10th February, 1931, respectively, and the Reports left by them—which are printed herewith—have given much satisfaction to the Committee, and they have given every consideration to the suggestions contained in the Reports.

The Annual Reports of the Medical Superintendent and Chaplain, together with the Statistical Tables and Statement of Accounts, are submitted with this report.

Your Committee have paid monthly visits to the Hospital and carefully inspected the condition of the Wards, and at such visits the patients have been given every opportunity of conversing with them, and the Committee are quite satisfied as to their care and treatment. The Stores and other departments have been inspected, and the Statutory Books have been examined.

A pension was granted during the year to a member of the Staff, in accordance with the Asylums Officers' Superannuation Act, 1909.

Your Committee report that there has been no change during the past year in the charge of 22s. 9d. per week for the maintenance of patients at the Hospital, but they are pleased to state that on and after the 1st April, 1931, the present rate will be reduced to 22s. 2d. per week.

Your Committee report that under the Mental Treatment Act, 1930, which came into operation on the 1st January, 1931, they are authorized to receive voluntary patients and to make provision for the temporary treatment of persons suffering from mental illness without certification, and the carrying out of the various provisions of the Act will considerably add to the work now being carried out at the Hospital.

Since the last Annual Report your Committee have given much consideration to the pressing need for the provision of a new Nurses' Home. The necessary approval of the Council has been obtained, as well as the sanction of the Minister of Health to borrow the money, and the work, which is being carried out by Henry Willcock & Co. Ltd., is now well in hand.

With regard to the acquisition of the Barrow Estate for a new Hospital, the Council will remember that at their meeting on the 17th June last they approved of the purchase of the estate, Steps Farm, and two island pieces of land for the sum of £14,300, and authorized your Committee to borrow such money and to prepare plans and estimates of the new buildings. These are well in hand, and will be submitted to the Council for approval at as early a date as possible.

Your Committee desire to place on record their appreciation and thanks to Alderman Metcalfe for the valuable services rendered by him to the Mental Hospital Committee extending over a period of twenty-one years, and for the past eight years as Chairman, and to express their regret that in consequence of his ceasing to be a member of the Council the benefit of his wide experience would be lost to the Committee.

In conclusion, they desire to express their approval of the conduct of the Medical Superintendent, Officers and Staff, in their constant and unremitting attention to those entrusted to their care.

W. H. BYRT,

Chairman.

THE COUNCIL HOUSE, BRISTOL,

30th March, 1931.

The Seventieth Annual Report of the Medical Superintendent, 1930.

*To the Chairman and Members of the Visiting Committee
of the Bristol City and County Mental Hospital.*

2nd March, 1931.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present to you the Seventieth Annual Report of the Mental Hospital, with Statistical Tables, for the Year 1930.

During the year there were :—

	<i>M.</i>	<i>F.</i>	<i>T.</i>
Admitted	124	154	278
Discharged recovered ..	28	47	75
„ relieved ..	24	20	44
Died	56	49	105

Of those discharged relieved, 10 men and 1 woman were transferred to other institutions.

	<i>M.</i>	<i>F.</i>	<i>T.</i>
Under treatment during 1930	596	695	1,291
Resident on 31st December, 1930 ..	488	579	1,067

Chargeable as follows :—

Bristol Union	423	560	983
Out-County Unions ..	12	1	13
Civil Private	13	18	31
Service and Ex-Service	40	—	40

Admissions.

Of these 14 men and 22 women had had a previous attack.

13 men and 17 women were admitted and discharged within the year.

88 per cent. of the total admissions came to us through a poor-law institution.

The six principal causes assigned were :—

Heredity in 33 men and 47 women, or together 29·42 per cent. of the total admissions.

Worry and prolonged stress	50
Cardio-vascular degeneration	38
Critical periods of life	29
Syphilis	23
Alcoholic excess	19

Discharges.

The same number of women and 5 less men than last year were discharged as recovered.

25 men and 34 women went out on a month's trial previous to their discharge, and an allowance equivalent to the maintenance rate was allowed in the case of 10 men and 4 women during their trial period. 2 men and 2 women relapsed during their trial.

The percentage of recoveries on the number of admissions was 23·53 for men and 31·54 for women, or together 28·00 as compared with 29·74 for last year.

Deaths.

The death rate per hundred on the average number resident was 11·77 for men and 8·84 for women, or together 10·20 as compared with 9·56 for 1929.

The principal causes of death were :—

Heart disease	25
General paralysis	11
Cerebral softening	10
Old age	9
Chronic kidney disease	7
Tuberculosis	7
Apoplexy	6
Cancer	5

For further detailed statistical information I would refer to the tables at the end of this report.

Inquests.

Three inquests were held. One on an epileptic patient who was asphyxiated by food; one sudden death due to cerebral hemorrhage; and the third on a female patient who eluded her relatives when out in their care and committed suicide away from Bristol.

The facts were communicated to the Board of Control at the time in each instance.

General Health.

This has been good on the whole, excluding many patients admitted in poor condition and those who have lived to a good old age and have eventually become bed-ridden.

One woman contracted diphtheria, presumably from visitors.

Two mild cases of dysentery occurred on the female side, and it speaks well for the nursing that no more cases occurred, seeing the crowded condition of the female wards.

There were five cases of each sex notified as suffering from tuberculosis during the year, and four cases have so much improved that the disease is considered no longer active.

Malarial treatment has been given to 21 patients during the year. 10 have markedly improved and 5 have already been discharged since this form of treatment has been instituted.

Casualties.

Accidents involving a fractured bone occurred in the cases of 2 men and 6 women. These were reported in detail and investigation proved them all to be accidental.

Restraint and Seclusion.

No restraint has been used during the year, and comparatively few instances of necessary seclusion for short periods, only once exceeding one hour in duration.

Recreation.

Indoor amusements have continued as usual. During the winter, weekly dances alternating with cinema shows

have been given, with a few concerts and variety entertainments. The staff provided a pantomime which was eventually given after Xmas early in the new year; the Chairman and several members of the Committee being present.

Outdoors, in the summer, the sports were held in fine weather. The men have made daily use of the bowling green, and the women have played croquet and other games.

Outings by chars-a-banc were enjoyed by both the men and women on separate occasions. 60 men and 92 women have on frequent occasions been out for the day with responsible relatives. 40 men and 50 women have enjoyed parole within the grounds, and 12 men and 3 women have been allowed outside on parole.

Rug-making and raffia work have continued in the convalescent wards.

Thanks are due to the Red Cross Society and others for donations of books and periodicals.

Welfare Work.

This has continued to be most beneficial to the hospital in investigating home conditions prior to discharge. Miss Bowen has also visited patients on trial and has attended with them at the General Hospital clinic. Cases have also been investigated where patients have not been satisfied with affairs at home, and with regard to the care of their children.

Religious Services.

During the repairs to the Church the Rev. D. O. Davies held the Sunday services in the recreation hall. The Chaplain of each denomination has paid regular weekly visits to the wards and special visits to the sick, and the usual services have been held.

The Chaplain's report is attached.

Maintenance Rate.

This has remained at 22s. 9d. throughout the year, but owing to reduction in costs, this has been recommended to be reduced by 7d. to 22s. 2d. as from 1st April next.

The charge for private patients continues at 35s. weekly.

Repairs.

Beyond minor repairs, Wards 17 and 5 have been redecorated. Considerable repairs were found necessary to the Church.

You have agreed to the re-conditioning of two staff houses, and the work will be done during the summer months.

Alterations, etc.

Many ward windows have been fitted with duplicate unglazed frames, thus allowing much more freedom in ventilation.

Ward 17 has been furnished as an admission ward, and this improvement has been commented upon by the visiting Commissioners.

Linen nightdress cases and toilet bags have been supplied to those wards where they can be appreciated.

The widening of Blackberry Hill entailed the demolition of two staff cottages and the sacrifice of a strip of land. In consideration of this, you have accepted the erection of two better-class houses in a more healthy position.

You have accepted a tender for the Nurses' Home, and have agreed to the erection of a house for a married assistant medical officer.

Produce.

The gardens have supplied the necessary vegetables, fruit and flowering plants, and the piggeries have provided a weekly dinner of pork in season.

Visits of Commissioners of the Board of Control.

Two Commissioners paid their annual visit on 18th March, 1930, and again on 10th February, 1931.

Their reports on both these visits are attached.

Staff.

During the year 5 male and 5 female nurses have gained their final certificate in mental nursing, and 10 male and 9 female nurses have passed the preliminary examination.

The health of the Staff has, on the whole, been satisfactory. Three nurses contracted diphtheria when this was so prevalent in the city, and all the Staff were inoculated against the disease.

The nurses have this year formed a hockey team under the organization of Miss Bowen, who has arranged fixtures throughout the season.

Officers.

There have been no changes in the officers during the year, but you have agreed to the appointment of an additional medical officer with experience, and also an extra clerk.

A pension was granted to Mr. George Jones who retired from the post of Deputy Head Male Nurse after 34 years' service under the Committee.

Mr. Gordon Scarff has been appointed Consulting Surgeon in Nose, Ear and Throat diseases.

On the resignation of the kitchen mistress, you appointed a male cook in charge of the kitchen.

Pathological Laboratory.

A report of the year's work in this department is attached. It will be noticed that the number of investigations has considerably increased.

The utility of a completely equipped laboratory with a fully trained assistant within the hospital is daily evident. In this connection, under Section 6 of the Mental Treatment Act, 1930, it is of note that the Board of Control propose to group all the mental hospitals into areas for combined pathological and psychological research to be centred, it is hoped, in the University of the area.

General.

I have referred to the fact that 88 per cent. of all admissions were sent to a Poor Law institution before admission to the Mental Hospital.

The Board of Control's last annual report (p. 43) reads as follows :—

“ It is the practice in some areas to require that all patients with mental symptoms requiring rate-aid should in the first instance be sent to observation wards in the Poor Law institution ”

“ Any such routine plan of dealing with early cases is to be deprecated : many patients would do better if sent direct to mental hospitals. Those requiring temporary observation need methods of treatment rarely provided in existing Poor Law institutions.”

Now that certification is unnecessary in so many cases under the Mental Treatment Act, 1930, it is hoped that with the exception of cases from the Courts all patients may be admitted direct from their homes.

With the annual increase in the residue of patients resident at the end of the year still being maintained, it is hoped that there will soon be some relief obtainable. The increase this year is a further 54.

The scheme of buildings at Barrow Gurney is under consideration with the architect with a view to submitting plans that will facilitate treatment in accordance with the Mental Treatment Act, 1930.

It is hoped also to establish a Clinic in the near future on the lines recommended in this Act.

I conclude by thanking my medical colleagues and the other officers for their help and assiduous attention to their duties throughout a busy year.

In presenting my Seventh Annual Report, I wish to thank the Chairman and Members of the Committee and the Town Clerk for their support and ready assistance at all times.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

E. BARTON WHITE,

Medical Superintendent.

Pathological Report.

Special items since opening of Laboratory :—

1925.

Dr. BARTON WHITE.—Blood sugar tolerance in cases of recent mental disorder. Drs. HADFIELD and WHITE.—Case of pellagra. (*Bristol Medico-Chirurgical Journal* March, 1926.)

1926.

Dr. G. HADFIELD.—Sections central nervous system and endocrine system in hypopituitarism. Psammomata in brain. Dr. B. WHITE.—Blood sugar tolerance. Drs. HADFIELD and B. WHITE.—A second case of pellagra. (*Journal Mental Science*, July, 1927.) Dr. H. SMITH.—Modification of Sachs-Georgi Reaction. (Paper read R.M.P.A., April, 1926.)

1927.

Dr. H. SMITH.—Isolation and investigation of different strains of dysentery group organisms, chiefly W.X. group. Dr. HADFIELD.—Complete sections central nervous system in Huntington's Chorea, compared side by side with the normal. Dr. B. WHITE.—Sections of globus pallidus with deposit of iron round vessels. Drs. J. REID and B. WHITE.—Malaria treatment in cases with positive Wassermann reaction in cerebro-spinal fluid.

1928.

Dr. A. L. TAYLOR.—Wassermann tests. Lange reaction in serum and cerebro-spinal fluid. Bladder carcinoma. Fibrous epulis. Epithelioma of dura, etc. Dr. J. REID.—Malaria and general paresis. Dr. B. WHITE.—Further investigations of globus pallidus. Microphotos of histological specimens of the globus. (Paper read Quarterly General Meeting R.M.A.P.A., 16th February, 1928.)

1929.

Drs. A. L. TAYLOR and L. BARBER.—General Paralysis and Malaria. Drs. A. L. TAYLOR, H. SMITH and L. BARBER.—Evidence of Syphilis in admissions. Dr. A. L. TAYLOR.—Prophylactic Vaccines in Dysentery. Drs. A. L. TAYLOR and BARTON WHITE.—Pathology of Manic-depressives.

1930.

The following is the Report for the Year 1930 :—

Routine work.

The routine system of collection of ward specimens instituted in January, 1929, has been continued during 1930, and has proved entirely successful. During the year 1,257 pathological examinations have been made, *i.e.* more than twice the number for 1929 (605). In addition, 91 post-mortem examinations have been performed, together with confirmatory histological investigations in a large number of the cases.

Syphilis in admissions.

Having regard to the importance of the syphilitic factor in mental disease, particular care has been taken to make the examinations as complete and reliable as possible in all suspected cases. To this end an improved method of preparing Lange's gold solution has been adopted after much experimentation, and quantitative estimations of c.s.f. protein and chlorides have been included in the routine

investigation of these cases. 400 blood and spinal-fluid examinations have been made during the year; this figure includes 267 new admissions, in which cases the Wassermann reaction is performed as a routine. The number is not yet large enough to permit a reliable judgment of the incidence and role of syphilis in the various types of insanity, but a statistical survey of this nature will be undertaken when more evidence has been accumulated.

Dysentery.

Three cases were notified as suffering from bacillary dysentery (as against four last year), and in two of these bacillus dysenteriae was isolated: the organism was of the Flexner W.X. type usually met with at the hospital. The third case gave persistently negative cultures on repeated examination. The programme of anti-dysenteric inoculation outlined in last year's report has now been completed, and 897 patients have now received the prophylactic vaccine. Treatment has been omitted in only a few cases where considered inadvisable owing to the poor condition of the patient, particularly on the female side. All new patients are inoculated on admission. The results of this intensive procedure appear to have been satisfactory during the past year, during which the hospital has been almost free from dysentery, but it is felt that they should be interpreted with caution, as the length of immunity conferred by the inoculation is uncertain in the present state of our knowledge.

SPECIAL INVESTIGATIONS.

Manic-depressive Insanity.

Further investigations have been made in the case of manic-depressive insanity referred to in the report for 1929. These have confirmed the previous negative findings, and it is reluctantly concluded that the pathological methods at present within our scope are not likely to succeed in elucidating the nature of the condition.

Malarial Treatment in General Paralysis.

An attempt has been made during the year to assess the value of malarial treatment in cases of general paralysis of the insane. In December, 1929, malaria was induced in a paretic patient by mosquito-bite, and during 1930 21 other patients were infected with the same strain of the parasite by blood-inoculations. In each case numerous blood-film examinations were made to indicate the progress

of the infection, which was satisfactorily controlled by quinine therapy where necessary. Careful records have been kept of the subsequent progress of the patients and a complete survey of the whole series is now in course of preparation. The results so far as can be stated here are by no means dramatic, but are useful in suggesting the type of case in which this form of treatment is most likely to be beneficial. Publication of this investigation will follow in due course.

In conclusion, I should like to express my appreciation of the willing co-operation of the hospital medical staff in the work of the department; their ever-ready interest and help have enabled the laboratory to cope with a bulk of investigations greatly in excess of any previous year. My laboratory assistant, Mr. Pope, is again to be congratulated on his thorough painstaking attention to technical detail throughout the year.

(Signed) A. L. TAYLOR, M.D.,
Pathologist.

30th March, 1931.

The Chaplain's Report.

To the Visiting Committee of the Bristol Mental Hospital.

ALL SAINTS' VICARAGE,

FISHPONDS,

21st February, 1931.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I beg to present my fourth annual report as Chaplain of the Bristol Mental Hospital.

During the last year a great work of renovation has been done to the fabric of the Church. Those of you, Mr. Chairman, Ladies and Gentlemen, who happened to see the condition of the decayed beams and woodwork that was removed from the roof and tower, etc., realize how essential this renovation work was. The flooring also on the men's side has been renewed. It had become unsafe in several places. As one of the patients told me: "If you lose sight of me, you know where I am gone."

During the renovation, from Trinity Sunday to the beginning of September, we held our services in the Recreation Hall, which was kindly prepared for us week by week. Though everything was done to make it accommodating to us at the Hall, we were all glad to be back again at Church, and our first service took the form of Thanksgiving, the Church being nicely decorated for the occasion.

I am pleased to say that, thanks to our organist and the lead of the choir, our services at Church are bright and hearty and much appreciated by the patients.

There were two occasions last year, viz. at Eastertide and on Harvest Festival Sunday, when the choir of St. John's, Fishponds, under the conductorship of Mr. Moss, gave us

a beautiful service of sacred music. We are very grateful to him and his choir for their kindness. It gives the patients a topic of conversation for weeks.

We also owe a deep debt of gratitude to the ladies who decorate the Church for our festivals. The patients appreciate these efforts to brighten their outlook.

During my visits to the patients I always receive every help from all the members of the staff and from the attendants.

Yours faithfully,

D. O. DAVIES,

Chaplain.

Report of the Commissioners of the Board of Control.

BRISTOL MENTAL HOSPITAL,

18th March, 1930.

IN spite of the fact that the returns given to us to-day show that there are at present vacancies in the Hospital for 22 males and 12 females, the information does not really represent the actual facts. It is true that in some of the convalescent wards there are these vacancies, but there is considerable overcrowding in the acute wards, much of the allotted day space being taken up now with beds, and on the estimated day and night space per patient throughout the Hospital there is considerable overcrowding. We know that this matter has for some time been engaging the earnest attention of the Committee, and we can only express our sincere hope that the matter may proceed without delay, and that the negotiations which are now taking place may lead at no distant date to the erection at any rate of an admission Hospital and convalescent villas which are so badly needed here. The question of the erection of a Nurses' Home is also, we understand, now under consideration, and this again is badly needed, but its erection on the lines of the proposed plan will not lead to any large increase in available space for patients.

In spite of the difficulties that, owing to the construction of the Hospital, Dr. Barton White has to contend with in the way of classification, we think that he is making the best use of the materials available, and we have been much struck to-day at the orderliness and contentment of the patients on both sides of the Hospital. The very few complaints that were made to us were obviously the result of disordered minds, and though we had a few applications for discharge, we have come to the conclusion that the patients here are carefully and kindly tended and are as happy as their mental states will permit.

We were pleased to see that there were plenty of books on the shelves and papers and picture papers in the wards. A capital plan is in vogue here of sending the daily picture papers, after the day of issue, to the sewing-room, where six or more copies are sewn together in brown paper covers with an ordinary sewing machine and then returned to the wards, where, as we saw to-day, they are a great source of pleasure to the patients, and, as we were told, last for several weeks. The wards and dormitories were clean and well kept, nicely decorated with flowers and well supplied with games and amusements. We should like to emphasize the importance of the charge nurses on both sides keeping a good supply of writing-paper and envelopes. We know that they can replenish their stock at any time, but we hope that in future the stocks in the wards will be replenished before they run out. We attach importance to the desirability of patients keeping in close touch with their relations, and think that they should be able without fail to get writing materials when they want. We should also like to see more hand towels issued for the use of those patients who would appreciate the use of a private towel and to see the numbers of roller towels decreased.

We were glad to see that the cinema operating box in the recreation hall has now been provided with a ventilation shaft.

Nine patients are now on trial, leaving in residence 1,006 patients, of whom 466 are men and 540 are women. There are 68 private patients, of whom 14 are women and 39 are service patients. Seventy-four patients have been allowed out on trial, money allowances being granted in 15 cases.

There has been no mechanical restraint. Parole is usually granted to 9 men and 2 women beyond the estate and to 56 men and 48 women within the estate.

Since the last visit 82 patients have died, and it speaks well for the care and attention given by the nursing staff that in none of these were bed sores existing at death. The deaths with one exception were from natural causes, the most common form of death being heart disease, occurring in 22 instances. An inquest was held in the case of a man found dead in bed and the verdict was one of "accidental death." The case was unusual, and at the post-mortem examination his larynx was found to be obstructed by his tongue.

There has been no enteric fever, but 5 cases of dysentery were reported during the year. Active measures have been taken to cope with this disease, and at present there is but one case and that convalescent.

Seven casualties involving fractures of bones occurred since the last visit, and in every case the injury was purely accidental.

The laboratory, under the supervision of Dr. Taylor, Pathologist at the General Hospital, continues its useful work, and the medical staff with a trained laboratory assistant undertake all Wassermann reactions and also the vaccine therapy for dysentery. Several patients are now undergoing malarial treatment for general paralysis. We are glad to hear that occupation therapy is being introduced, and a nurse has been attending classes in the city. We hope that this valuable treatment will be extended, so that even the wards in which are the least hopeful patients will in time have their occupation classes.

The number of sedatives given at night is few considering the size of the Hospital, and we note this as possibly related to the fact already mentioned that the wards were unusually quiet and orderly.

The Medical Staff remains at the same strength, and we hope in the near future it will be possible to appoint an additional assistant Medical Officer. We understand that at present there are no available quarters for such an additional doctor, and consequently the general position of the accommodation of the medical staff might, and with advantage, have to be considered. We hesitate to make further recommendations involving expenditure, but we cannot help feeling that the Medical Superintendent should have a house separate from the main building, and that there should be at least one set of married quarters for an assistant Medical Officer.

In any case, the expanding demands of medical science, the increase in the number of patients, and the prospect of new and very desirable developments, such as an out-patients' clinic, renders it important that the medical staff should be strengthened.

We were much pleased with our visit.

HERBERT C. BAILEY.	} <i>Commissioners of the Board of Control.</i>
BEDFORD PIERCE.	

Report of the Commissioners of the Board of Control.

BRISTOL MENTAL HOSPITAL,

10th February, 1931.

WE have to-day visited this Hospital, which we have found in a very satisfactory condition, though there are parts of it which are in need of redecoration.

Since the last visit the ventilation in all wards has been improved by metal out frames, enabling the windows to be opened wide. We were much pleased with the appearance of the admission ward F.17, with its bright coloured screens between the beds and the lockers with the same material as the screens as a curtain in front. This ward is a great improvement on the old admission ward 10. We were also very glad to find that many of the better patients have clothing and towels marked with their name and bags for keeping brushes, tooth brush and so on, and that modern types of underclothing are supplied to the better patients who desire them. Another nice feature that we noticed was a bright coloured nightdress case on the women's side, and every nightshirt on the male side marked clearly with the patient's name in pencil.

The wards were well kept, nicely warmed and well ventilated, there were plenty of books and a good supply of writing paper and envelopes, and in some wards a capital lot of picture papers roughly bound in brown paper in the sewing-room.

The lady welfare worker does most valuable work here, both amongst the patients in the Hospital and after they have left. She visits homes before patients go out on trial, and also sees that they attend at the Clinic. The importance and value of such a helper can hardly be exaggerated. In going through the laundry it struck us that a steam clothes

press would be a valuable addition to the equipment there. In other places where this machine is installed we have had very enthusiastic accounts of its usefulness. We found the patients comfortable and generally happy and free from complaints. We talked to everyone who showed any desire to converse and gave private interviews to two women who asked for them, and one man.

While in the recreation hall, where the cinema is installed, we were told that the question of putting the operating box outside the main wall is being considered. We very much hope that the Committee will see their way to do this, as it is a matter in our view of some importance.

In the kitchen we had an opportunity of tasting the food which was being served for the patients' dinner, and found it well cooked and most palatable. We hope that at no distant date this kitchen will be supplied with a fish frier. We very much hope that occupation therapy will be extended as far as possible on both sides of the hospital—we saw a good many patients to-day sitting idle whom we thought might be persuaded to amuse themselves by some simple hand work.

We were very pleased to hear that some of the old ladies are allowed to make tea in their own teapots, and we know that the privilege is much appreciated.

In the female bathroom we were glad to hear that it is proposed to put rails for the clean towels and benches round the walls in the dressing-rooms.

There are now on the statutory books the names of 3 male and 7 female temporary patients and 472 male and 573 female certified patients, a total of 1,055. One female temporary patient is a private patient and there are 52 male and 16 female private patients, 41 of the former being service or ex-service patients. Eight patients were out on trial at the time of our visit, leaving in residence 1,047, all of whom we endeavoured to see. The figures given to us to-day show that there are vacancies for 20 men and overcrowding on the female side by 26.

Twelve men and three women are usually allowed full parole, while 40 men and 50 women have limited parole.

The present nursing staff is as follows :—

		<i>M.</i>		<i>F.</i>		<i>Total.</i>
Charge	.. ..	14	..	10	..	24
Ordinary	.. ..	47	..	63	..	110
Night	.. ..	11	..	14	..	25

37 men and 22 women are certified or registered as mental nurses, and 17 and 19 respectively have passed the preliminary examination.

Since the last visit there have been 99 deaths, and we note with satisfaction that a post-mortem examination was held in 83 cases.

The causes of death have been as follows :—

Cardio-vascular diseases	.. ..	29
Respiratory diseases	.. ..	16
Senile decay	.. ..	12
General paralysis	.. ..	11
Other causes	.. ..	31

Inquests were held in 4 cases, the verdict in each case being in accordance with the medical evidence.

Since the last visit there have been 8 deaths from tuberculosis, and at the time of our visit there were 9 patients suffering from this disease. There has been one death from dysentery and 6 cases under treatment since the last visit. There are 5 cases to-day, but one of these was taken ill this morning, and had not yet been notified to the Board.

Bacteriological examination is being made, but so far it is impossible to state definitely the nature of this organism. The 5 cases were being nursed in single rooms leading from the large dormitories which are occupied by patients who have previously had dysentery. Although careful precautions have been taken to immunize the patients, it is very difficult, owing to the lack of separate available accommodation here, to ensure adequate measures for the prevention of the spread of the disease in the circumstances in which these patients are being nursed. We have discussed the difficulty with Dr. Barton White, and we know that he will fully understand our view of the matter and will appreciate any arrangement either permanent or

temporary which it may be possible to make in the future to isolate more effectively dysentery and other zymotic diseases which may from time to time arise.

We know that it will be a matter of great satisfaction to our Board to know that the Committee has sanctioned the appointment of an additional Assistant Medical Officer.

Dr. Barton White has the assistance of Drs. Smith, Barber and Simpson.

We were much pleased as the result of our visit.

HERBERT L. BAILEY.	} <i>Commissioners</i>
E. V. LEWIS.	
ISABEL G. H. WILSON.	
	<i>of the Board</i>
	<i>of Control.</i>

Statistical Tables, 1930.

TABLE I.—*Shewing the Admissions, Re-admissions, Discharges, and Deaths during the Year 1930.*

	Males.	Females.	Total.
In the Hospital on the 1st January, 1930 ...	472	541	1013
Admitted for the first time during the year..	110	132	242
Re-admitted during the year	14	22	36
Total under care during the year	596	695	1291
Discharged or Removed : M. F. T.			
Recovered 	28	47	75
Relieved	24	20	44
Not Improved.. 	0	0	0
Died 	56	49	105
Total discharged and died during the year ...	108	116	224
Remaining in the Hospital, Dec. 31st, 1930	488	579	1067
Average number resident during the year ...	476	554	1030

TABLE II.—*Shewing the Admissions, Re-admissions, Discharges and Deaths, from the opening of the Hospital to the present date, December 31st, 1930.*

	Males.	Females.	Total.
Patients admitted during a period of 70 years	5003	5503	10506
Patients re-admitted " "	667	930	1597
Total of cases admitted 	5670	6433	12103
Discharged : M. F. T.			
Recovered 	1881	2496	4377
Relieved	773	1006	1779
Not Improved 	36	28	64
Died	2492	2324	4816
Total discharged and died during 70 years ...	5182	5854	11036
Remaining December 31st, 1930 	488	579	1067
Average number resident during the 70 years	304	326	630

TABLE III.—*Shewing the Admissions, Discharges and Deaths, with the Annual Mean Mortality and Proportion of Recoveries per cent. on the Admissions.*

Asylum opened in February, 1861.	Admitted.			Discharged.						Died.			Remaining December 31.			Average Numbers Resident.			Per Centage of Recoveries on Admissions (Excluding Transfers).			Per Centage of Deaths on Average No. Resident.					
	Recovered.		Total.	Relieved.		Total.	Not Improved.		Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.			
	Male.	Female.		Male.	Female.		Male.	Female.																	Male.	Female.	Male.
Totals and Aver- ages from Feb., 1861, to Dec. 31st, 1914 (inc.)	4169	4511	8680	1346	1750	3096	581	634	1215	27	18	45	1775	1612	3387	440	497	937	255	290	545	35·29	39·12	35·71	13·91	10·81	12·11

The Hospital was occupied from 1915 to 1919 as a Military Hospital by the War Office, the changes during such period being as follows:—

1915 to 1919.	387	391	748	210	271	481	—	—	—	—	—	—	252	178	430	—	—	—	—	—	—	—	—	—	—	—	—
Year 1920	..	46	75	121	25	34	59	13	11	24	0	1	—	26	45	324	442	766	324	312	636	54·35	45·33	48·76	5·86	8·33	7·07
" 1921	..	95	104	199	23	46	69	20	25	45	—	—	47	50	97	329	425	754	338	445	778	27·38	46·00	37·50	14·11	11·23	12·47
" 1922	..	87	134	221	23	42	65	11	49	60	—	—	25	60	85	357	403	760	342	410	752	28·00	32·80	31·00	7·30	14·60	11·30
" 1923	..	99	125	224	46	46	92	15	27	42	5	2	33	44	77	357	409	766	362	409	771	48·40	38·60	43·00	9·11	10·75	10·00
" 1924	..	132	152	284	41	33	74	21	16	37	3	0	33	67	100	391	445	836	376	436	812	32·80	22·45	27·20	8·78	15·37	12·32
" 1925	..	126	150	276	37	44	81	16	24	36	1	0	48	56	104	415	475	890	405	461	866	31·36	22·93	30·56	11·85	12·15	12·00
" 1926	..	99	171	270	25	53	78	13	24	37	0	0	50	42	92	426	527	953	419	498	917	26·	6·31	55·29	77·11	9·93	8·43
" 1927	..	118	160	278	25	40	65	22	21	43	0	1	49	49	98	448	576	1024	442	545	987	22·52	25·81	24·43	11·58	8·99	9·95
" 1928	..	98	148	246	24	39	63	19	92	111	0	0	54	47	101	449	546	995	447	583	1030	25·53	27·46	26·70	12·08	8·06	9·5
" 1929	..	120	159	279	28	52	80	18	67	85	0	1	51	44	95	472	541	1013	455	538	993	24·35	33·77	29·74	11·21	8·18	9·56
" 1930	..	124	154	278	28	47	75	24	20	44	0	0	56	49	105	488	579	1067	476	534	1030	23·53	31·54	28·00	11·77	8·84	10·2

TABLE IV.—*Shewing the Age at First Attack in all cases Admitted during the Year 1930, excluding Transfers.*

AGE.	Age on First Attack.		
	Male.	Female.	Total.
Congenital	19	5	24
Under 10 years	—	—	—
From 10 to 15 years	—	2	2
„ 15 „ 20 „	2	5	7
„ 20 „ 30 „	17	21	38
„ 30 „ 40 „	16	33	49
„ 40 „ 50 „	19	31	50
„ 50 „ 60 „	18	24	42
„ 60 „ 70 „	17	23	40
„ 70 „ 80 „	9	4	13
„ 80 „ 90 „	1	1	2
Over 90 years	—	—	—
Total	118	149	267

TABLE V.—*Shewing the Religious Persuasions of the Patients Admitted during the Year 1930, excluding Transfers.*

RELIGIOUS PERSUASION.	Male.	Female.	Total.
Church of England	94	99	193
Protestant Dissenters	19	40	59
Roman Catholics	4	9	13
Jews	—	1	1
Unknown	1	—	1
Total	118	149	267

TABLE VI.—*Shewing the Form of Mental Disorder on Admission, in the Admissions for the Year 1930, excluding Transfers.*

FORM OF MENTAL DISORDER.	ADMISSIONS.		
	Male.	Female.	Total.
Congenital with Epilepsy	6	—	6
Congenital without Epilepsy	13	4	17
Moral Imbecility	—	1	1
Insanity with Epilepsy	3	6	9
General Paralysis of the Insane	10	3	13
Insanity with grosser brain lesion	7	8	15
Confusional Insanity	18	9	27
Primary Dementia	17	7	24
Mania :—Recent	3	20	23
Recurrent	1	2	3
Melancholia :—Recent	8	36	44
Chronic	2	—	2
Recurrent	3	10	13
Alternating Insanity	—	2	2
Delusional Insanity :—Systematised	2	—	2
Non-Systematised	10	32	42
Obsession	1	—	1
Moral Insanity	1	—	1
Dementia :—Senile	13	6	19
Secondary	—	3	3
Totals	118	149	267

TABLE VII.—*Shewing Principal and Contributory Causes, of direct admissions, admitted during the Year 1930.*

EXCITING CAUSE.	Principal Cause.		Contributory Cause.	
	Male.	Female.	Male.	Female.
Insane Heredity	28	27	..	2
Epileptic Heredity .. .. .	..	2	..	1
Neurotic Heredity	6	12	..	1
Eccentric Heredity .. .. .	..	2	..	..
Alcoholic Heredity .. .. .	..	2	..	..
Moral Deficiency	1	..	..	..
Congenital Mental Deficiency ..	8	..	..	..
Eccentricity .. .. .	..	2	..	1
Deprivation of:—Hearing	1	..	..	3
Sight .. .. .	..	..	..	2
Puberty and Adolescence .. ..	..	1	4	2
Climacteric .. .. .	..	8	..	12
Senility	12	8	1	1
Pregnancy .. .. .	..	1	..	2
Puerperal State (not septic) ..	..	4	..	..
Lactation .. .. .	..	2	..	..
Sudden Mental Stress	2	..	..	..
Prolonged Mental Stress	8	8	3	33
Privation and Starvation .. ..	..	1	..	1
Alcohol	9	2	3	4
Tuberculosis .. .. .	..	..	..	4
Influenza	1	3	..	1
Other Specific Fevers .. .. .	..	1	..	4
Syphilis, acquired	11	5	2	5
Syphilis, congenital .. .. .	..	..	..	1
Injuries	1	..	..	..
Operations .. .. .	..	..	..	5
Lesions of Brain	1	8	..	..
Epilepsy	5	6	2	1
Other defined Neuroses .. .. .	..	7	..	1
Cardio-Vascular Degeneration ..	10	11	6	11
Valvular Heart Disease .. ..	..	1	..	3
Renal and Vesical System .. ..	..	..	..	4
No Principal Factor Assigned ..	..	20	..	..
No Factor Assignable	1	1	..	..
No Factor Ascertained, History Defective	13	4	..	..
Total	118	149	21	105

TABLE VIII.—Shewing the Cause of Death in the cases of all Patients who died during the year 1930, and the Age at Death.

CAUSES OF DEATH.	NUMBER OF DEATHS AND AGES AT DEATH.								Total. M. F.	Post Mortem. Total.
	Under 15. M. F.	15 to 19. M. F.	20 to 24. M. F.	25 to 34. M. F.	35 to 44. M. F.	45 to 54. M. F.	55 to 64. M. F.	65 and upwards M. F.		
Erysipelas	1 0	1 0	1
Tuberculosis—of the respiratory system	0 1	..	2 1	0 1	0 1	..	1 0	3 4	6
Other forms	1 0	1 0	1
Cancer and Other Malignant Disease	0 1	0 1	..	1 2	1 4	4
Cancer of the Female Genital Organs	0 1	..	0 1	1
Encephalitis	1 1	..	..	..	2 0	3 1	4
Meningitis	0 1	..	..	0 1	1
Cerebral Hæmorrhage, Apoplexy, etc.	0 1	2 0	2 1	4 2	6
General Paralysis of the Insane	2 0	5 1	2 1	..	..	9 2	8
Other Forms of Insanity	1 0	0 1	..	..	0 1	1
Epilepsy	1 0	1
Cerebral Softening	1 0	3 3	0 3	4 6	9
Pericarditis	1 0	..	..	1 0	1
Other Diseases of the Heart	0 1	0 2	1 2	4 6	3 6	8 17	25
Diseases of the Arteries	1 0	..	1 0	1
Bronchitis	2 2	2 2	4
Broncho-pneumonia	2 0	2 0	1
Lobar Pneumonia	0 1	1 0	1 1	1
Pleurisy	2 0	..	2 0	2
Gangrene of the Lung	0 1	1
Chronic Nephritis	0 1	..	..	2 2	3 0	5 3	5
Old Age	6 3	6 3	1
Poisoning (Carbolic Acid)	0 1	..	..	..	0 1	1
Asphyxia by Choking	1 0	1 0	1
Total	0 1	..	5 4	6 6	5 8	14 13	26 17	56 49	91

TABLE IX.—*Shewing the Occupations of Patients Admitted in 1930, excluding Transfers.*

MALES.	No.	FEMALES.	No.
Architect	1	Cap Maker	1
Bakers	3	Charwomen	2
Bank Clerk	1	Chocolate Maker	1
Basket Maker	1	Cigarette Maker	1
Boiler Maker	1	Corset Maker	1
Boot Makers	2	Domestics	15
Bricklayer	2	Dressmaker	1
Butter Merchant	1	Factory Hand	1
Caretaker	1	Glue Maker	1
Carter	1	Hotel Maid	1
Cattle Drover	1	Housewives	71
Chef	1	Laundresses	2
Chemist	1	Librarian's Assistant	1
Clerks	5	Licensee	1
Clothes Peg Maker	1	Music Teacher	1
Coach Body Builders	2	Nil	30
Coal Tipper	1	Parlourmaids	3
Corn Merchant	1	Rag Sorters	2
Electrician	1	Scholars	2
Engineers	2	Shop Assistants	2
Ex-Army Officer	1	Shop Keeper	1
Firemen, Ships'	2	Soap Packer	1
Fitters' Mates	3	Tailoresses	2
Flour Mill Hand	1	Tailor's Machinist	1
Garage Assistant	1	Tobacco Worker	1
Gardeners	4	Typist	1
Gas Workers	2	Upholstress	1
Glass Works Foreman	1	Waitress	1
Hairdresser	1		
Labourers	20		
„ Builder's	4		
„ Dock	2		
„ Farm	3		
Liftman	1		
Lithographer	1		
Miners	2		
Motor Bus Workers	3		
Musicians	2		
Newsvendors	2		
Nil	10		
Old Age Pensioner	1		
Painters	2		
Pawnbroker's Assistant	1		
Plumber	1		
Police Constable	1		
Professional Golfer	1		
Publican	1		
Railway Workers	2		
Restaurant Keeper	1		
Seamen	2		
Sewing Machine Mechanic	1		
Steel Fixer	1		
Stoker	1		
Tobacco Worker	1		
Tramway Worker	1		
Upholsterer	1		
Wagon Repairer	1		
Watchman	1		
Wire Splicer	1		
Total	118		149

PATIENTS' DIETARY

(Typical Week).

	BREAKFAST. Pint Tea or Coffee Daily.	DINNER. Bread Daily.	TEA. Pint Tea Daily.
Sunday.	Bread and Butter, Marmalade.	Cold Pork. Potatoes. Pickles. Rice Pudding.	Fruit Cake.
Monday.	Bread and Butter and Porridge.	Roast Beef. Potatoes. Haricots.	Currant Loaf.
Tuesday.	Polony and Bread and Butter.	Boiled Bacon. Two Vegetables.	Bread and Butter and Jam.
Wednesday.	Brown Bread and Butter and Porridge.	Roast Mutton. Potatoes. Vegetables	Bun and Bread and Butter.
Thursday.	Boiled Ham and Bread and Butter.	Fish. Two Vegetables. Pudding.	Bread and Butter and Jam.
Friday.	Bread and Dripping and Porridge.	Sausages. Potatoes. Peas.	Cocoanut Cake.
Saturday.	Pasty and Bread and Butter.	Soup. Potatoes. Suet Roll and Syrup.	Brown Bread and Butter and Jam.

SCALE (MALES) MEAT 6 oz., Potatoes 10 oz., Bread and Butter, 7 oz.
 (FEMALES) „ 5 oz., „ 8 oz., „ 6 oz.
 (MALES) FISH 10 oz., SOUP 1 pint, Bacon 4 oz.
 (FEMALES) „ 8 oz., „ 1 pint, „ 4 oz.

Salads of lettuce, cucumbers, tomatoes, etc., given frequently during the summer; also pickled cabbage and onions. Roast Veal on Whit-Sunday. Luncheon Sausage, Pressed Beef or Brawn often substituted for fish. Currant Buns for Breakfast and Tea on Good Friday. Lunch and Supper for working patients, 4. oz. Bread and 1 oz. Cheese or 4-oz. Bun and $\frac{1}{2}$ pint Coffee or Tea. Female patients employed in Laundry and Kitchen also get $\frac{1}{2}$ pint Tea, 3 oz. Bread and Butter at 4 o'clock. Buns and Coffee provided at each Entertainment. Extra sick diet as ordered by Medical Officers. Fruit grown on estate distributed as available. Tobacco and Canteen Issues twice weekly.

*STATEMENT of PAYMENTS from April 1st, 1930,
to March 31st, 1931.*

	£	s.	d.	£	s.	d.
SALARIES, WAGES AND PENSIONS				29677	5	3
PROVISIONS, VIZ. :						
Meat, Bacon, Fish and Fats ...	4392	16	1			
Milk, Butter, and Cheese ...	3121	5	1			
Flour, Oatmeal, Rice, Peas, &c.	1730	14	7			
Sugar, Jam, Treacle and Fruit	1252	16	7			
Coffee, Chicory, Tea, and Cocoa	817	2	4			
Sauces, Vinegar, Mustard and Pepper	88	13	8			
Eggs and Poultry	397	7	6			
Yeast, Salt and Bakers' Sundries	224	15	1			
				12025	10	11
NECESSARIES, VIZ. :						
Cutlery and Tinware	158	5	5			
Kitchen & Laundry Requisites, &c.	186	7	8			
Electric Lamps and Fittings ...	178	14	9			
Coal, Gas, Electricity and Oils ...	4396	5	4			
Water, Soap, Soda, &c.	1605	17	1			
Brushes, Baskets, Earthenware, Glass, &c.	367	8	3			
Floor Polish, Floor Brushes, &c.	165	3	3			
				7058	1	9
CLOTHING, VIZ. :						
Patients' Clothing and Attend- ants' Uniforms	1987	17	6			
Haberdashery, Boots, Leather, &c.	371	2	9			
				2359	0	3
FURNITURE AND BEDDING, VIZ. :						
Blankets, Counterpanes, Carpets, and Floor Covering	357	11	11			
Mattresses, Bolsters, Upholsterers' Wages, &c.	341	18	3			
Carried forward ...	£699	10	2	£51119	18	2

	£	s.	d.	£	s.	d.
Brought forward ...	699	10	2	511	19	18
Bedsteads, Chairs, Settees, and other Furniture	126	15	4			
Towelling and Water Sheeting	177	15	0			
Window Holland and Curtains	27	16	8			
Table and Bed Linen	363	4	2			
				1395	1	4
FARM AND GARDEN, VIZ. :						
Killing Pigs, &c.	32	12	9			
Tools, Implements and Repairs ...	53	3	7			
Manure and Straw	166	9	3			
Meal, Sharps, Corn and Bran ...	107	7	0			
Plants, Seeds & Sundries ...	65	6	5			
Hauling, Ploughing, &c.	97	17	6			
				522	16	6
DISPENSARY, VIZ. :						
Drugs and Medical Instruments, &c.				584	7	5
WINES AND SPIRITS				14	5	0
RATES, TAXES AND INSURANCE ...				2873	11	0
REPAIRS AND ALTERATIONS				3108	2	3
MISCELLANEOUS, VIZ. :						
Patients' Maintenance, on Trial, &c.	325	9	0			
Advertising, Auditing Accounts, Telephones, &c.	151	19	6			
Entertainments, Music, Tobacco, Canteen, &c.	562	18	3			
Sweeping Chimneys, Flues, &c.	17	11	0			
Newspapers and Periodicals ...	113	1	1			
Postages, Telegrams, Printing, Stationery, &c.	334	3	7			
Funeral, Removal, Travelling Expenses, Carriage of Goods, Motor Hire, and Sundries ...	212	19	8			
				1718	2	1
Total				£61336	3	9

ARTHUR W. KING, *Steward.*

21st April, 1931.

An Account of the RECEIPTS and PAYMENTS of the VISITING COMMITTEE of the BRISTOL MENTAL HOSPITAL
Dr. from April 1st, 1930, to March 31st, 1931. Cr.

[illegible]

W. H. GRIGG & PERKINS,

*Chartered Accountants,
Auditors.*

Examined and found correct,

FRED BERRIMAN, } *For the*
HENRY A. WHITE, } *Visiting Committee.*

ABSTRACT of FARM and GARDEN ACCOUNT from April 1st, 1930, to March 31st, 1931.

二

Dr.

To Value of Stock, 1st April, 1930	...	£	s. d.	£	s. d.
„ Garden Seeds, Pig Food, Manure,				676	12 8
Ploughing, Straw, &c., &c.	...	577	3 0		
„ Gardeners' and Labourers' Wages	...	1,186	9 4		
„ Insurance	...	33	10 5		
				1,797	2 9
„ Value of Pigwash, &c....	...			36	0 0
„ Balance in favour of Farm	...			628	3 9

21st April, 1931.

£3,137 19 2

By Supplied to the Hospital, viz.:	£	s.	d.	£	s.	d.
19,005 lbs. of Pork	...	...	...	866	19	9
Roots, Vegetables, Herbs, Fruit, &c.	1,262	0	1			
Plants and Flowers supplied to Wards	104	0	0			
				—	2,232	19 10
„ Sales, &c., viz.:						
Pigs	...	...	...	62	0	0
Sundries	...	...	...	26	3	0
				—	88	3 0
„ Value of Stock, March 31st, 1931	...				816	16 4

ARTHUR W. KING,
Steward.

£3,137 19 2

